

<b>PATENT APPLICATION FEE DETERMINATION RECORD</b> Effective December 29, 1999	Application or Docket Number
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## CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE		
TOTAL CLAIMS	11	minus 20 = *
INDEPENDENT CLAIMS	2	minus 3 = *
MULTIPLE DEPENDENT CLAIM PRESENT		

\* If the difference in column 1 is less than zero, enter "0" in column 2

### SMALL ENTITY TYPE ☐

RATE	FEE
	345.00
X\$ 9=	/
X39=	/
+130=	/
TOTAL	345

### OR OTHER THAN SMALL ENTITY

RATE	FEE
	690.00
X\$18=	/
X78=	/
+260=	/
TOTAL	/

## CLAIMS AS AMENDED - PART II

		(Column 1)		(Column 2)	(Column 3)	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	
	Total	*	10	Minus	** 20	= /
	Independent	*	2	Minus	*** 3	= /
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					

### SMALL ENTITY

RATE	ADDI- TIONAL FEE
X\$ 9=	/
X39=	/
+130=	/
TOTAL ADDIT. FEE	/

### OR OTHER THAN SMALL ENTITY

RATE	ADDI- TIONAL FEE
X\$18=	/
X78=	/
+260=	/
TOTAL ADDIT. FEE	/

		(Column 1)		(Column 2)	(Column 3)	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	
	Total	*	12	Minus	** 20	= /
	Independent	*	1	Minus	*** 3	= /
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					

RATE	ADDI- TIONAL FEE
X\$ 9=	/
X39=	/
+130=	/
TOTAL ADDIT. FEE	/

### OR OTHER THAN SMALL ENTITY

RATE	ADDI- TIONAL FEE
X\$18=	/
X78=	/
+260=	/
TOTAL ADDIT. FEE	/

		(Column 1)		(Column 2)	(Column 3)	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	
	Total	*		Minus	**	=
	Independent	*		Minus	***	=
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					

RATE	ADDI- TIONAL FEE
X\$ 9=	/
X39=	/
+130=	/
TOTAL ADDIT. FEE	/

### OR OTHER THAN SMALL ENTITY

RATE	ADDI- TIONAL FEE
X\$18=	/
X78=	/
+260=	/
TOTAL ADDIT. FEE	/

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

**UNITED STATES PATENT & TRADEMARK OFFICE  
Washington, D.C. 20231**

REQUEST FOR PATENT FEE REFUND										
1 Date of Request: <u>6/24/03</u>		2 Serial/Patent # <u>09/537,693</u>								
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT						
	Filing			\$						
	<del>Amendment</del>			\$						
<input checked="" type="checkbox"/>	Extension of Time	15	2/25/03	\$ 465						
	Notice of Appeal/Appeal			\$						
	Petition			\$						
	Issue			\$						
	Cert of Correction/Terminal Disc.			\$						
	Maintenance			\$						
	Assignment			\$						
	Other			\$						
		7 TOTAL AMOUNT OF REFUND		\$ 465						
		8 TO BE REFUNDED BY:								
		<input checked="" type="checkbox"/> Treasury Check <u>C.C.</u>								
		Credit Deposit A/C #:								
		9 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px; text-align: center;">--</td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>					--			
		--								
10 REASON:										
	Overpayment									
	<del>Duplicate Payment</del>									
<input checked="" type="checkbox"/>	No Fee Due (Explanation):									
<u>E.O.T. filed outside six (6) months Statutory Period.</u>										
11 REFUND REQUESTED BY:										
TYPED/PRINTED NAME: <u>Andrea Smith</u>		TITLE: <u>Pets. Examiner</u>								
SIGNATURE: <u>[Signature]</u>		PHONE: <u>703/308-6711</u>								
OFFICE: <u>Ofc. of Petitions</u>										
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****										
APPROVED: <u>[Signature]</u>		DATE: <u>6/25/03</u>								

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to: